Email notice sent to hospital data reporting contacts on December 8, 2008

The purpose of this notification is to advise you of a change to the Arizona hospital discharge data reporting requirements for E code reporting effective with discharges on and after January 1, 2009.

Wherever possible, the Arizona Department of Health Services has conformed to national standards for the state data reporting requirements, including reliance on the National Coding Guidelines for proper coding practice. The current Guidelines instruct coders to "Assign the appropriate E code for all initial treatments" and "...not for subsequent treatment." Unfortunately, time and experience have shown that this "initial treatment" guidance is counter-productive to complete and accurate E code collection, while simultaneously placing an undue burden on coders.

As many of you are aware, the Arizona Department of Heath Services has been considering changes to the state E code requirements. As a part of evaluating the proposed changes, the Department held discussions with coders from Arizona hospitals that would be impacted if the changes were implemented. The first of these discussions took place during the AzHIMA Fall Meeting held at John C. Lincoln North Mountain Hospital on September 12, 2008. Three subsequent meetings were held, two in Phoenix and one in Tucson.

The outcome of these discussions was that the coders involved were supportive of the changes proposed by the state.

Therefore, effective for discharges January 1, 2009 and later, the sequence of treatment is no longer relevant in determining whether an E code must be assigned. Simply put, if a diagnosis code falls in the range of 800-999 (in most cases the encoder will prompt for an E code), then the E code must be assigned. Determining if the visit is an initial treatment or subsequent visit is no longer necessary.

The Department realizes this change is a deviation from the National Coding Guidelines; however, we feel it is necessary to the continued improvement of Arizona data quality and completeness. The Department has sent a letter regarding this change to the national cooperating parties that promulgate the Guidelines, and has requested that the parties consider making this change at the national level.